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Web Announcement 253

Important Notice Regarding Procedure Codes No Longer Covered and Changes to Code 41899

The Division of Health Care Financing and Policy (DHCFP) has determined that changes to certain procedure codes will promote the use of uniform language to describe medical, surgical and diagnostic services and provide fiscal savings for Nevada Medicaid/Nevada Check Up. **The following changes are effective with dates of service on and after April 1, 2009.**

- The procedure codes listed on the [attached document](#) are no longer covered by Nevada Medicaid/Nevada Check Up. Providers are urged to use codes that are more specific to the procedures being billed.
- Code 41899 (Dental Surgery Procedure) is covered **only** for provider types 10 (Outpatient Surgery, Hospital Based) and 46 (Ambulatory Surgery Centers). The ASC Payment Group for code 41899 has been changed from AS7 to AS1, because the code is used for routine dental services.